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Work Order (Bid Form)

WORK ORDER INFORMATION

Work Order Name:

Work Order Type: Weatherization Audit Name: MCNAIRY

CLIENT INFORMATION

Client Name:

Address:

Client ID:

Alt. Client ID: 16016SW-1043

AGENCY INFORMATION

Agency: SWHRA

Address: 1574 White AVE

Henderson, TN

Agency Phone: (731) 989-5111

Fax:

Email Address:

Agency Contact: Murley, Rickey

Work Phone: Cell Phone: Email Address:

Company Name & License Number:	
Contractor's Signature:	

<u>COMMENT</u>

NOTICE:

All work performed and material must meet all requirements as stated in the Southeast Weatherization Field Guide. It is the contractor's responsibility to pull all necessary permits required for the town or county where the work is being performed. No change order work shall be done until the change order has been approved and signed. If heater is required no air sealing should be done before heater is installed.

731-632-4779

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Measures

1	Measure 1 Infiltr	ration Redctn			Component	ts		ı	nspected
C	omment					 Actual			
				<u> </u>	Estimated			T-4-8	
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Construction Materials/Hardwar e	Seal exhaust vent over cook stove.Sealpipes under kitchen sink and back wall,Seal ceiling in hall closet	Each	1		***************************************			
2	Labor	Labor	Hour						
3	Construction Materials/Hardwar e	Seal pipes under bathroom vanity,Seal back of wall,Seal pipe penetrations for water heater. Seal attic access in bedroom closet	Each	1					
4	Labor	Labor	Hour						
5	Construction Materials/Hardwar e	Seal closet in middle bedroom. Seal crown molding and corners in living room. Seal around breaker box	Each	1					
6	Labor	Labor	Hour						
7	Construction Materials/Hardwar e	Seal around old flu in living room, Seal around dryer and seal wall .Seal pipes behind washer	Each	1					
8	Labor	Labor	Hour						
2	other Detail] [
				Measur	re Sub Total:		,	Sub Total:	
Last the second	Field Notes:								

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Measure 2 DW	H Pipe Insulation			Componen	ts		I	nspected	
Comment	nment		Estimated			Actual Actual			
# Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total	
I Insulation	DHW Pipe Insulation	Each	1	and the state of t					
2 Labor	Labor	Each	1						
Other Detail	7					٦			
]			
			Measur	e Sub Total:]]	Sub Total:		
Field Notes:									
				Componen	έ ς Λ1			nspecte	
Measure 3 Atti	ic Ins. R-30			Componen	13 /\ I				
_				-					
Comment				Estimated	,		Actual		
	Description / Comment	Units	Qty	Estimated Unit Cost	Total	Qty	Actual Unit Cost	Total	
# Material / Labor	Description / Comment Attic Insulation - Blown	<i>Units</i> SqFt	Qty 988			Qty		Total	
# Material / Labor 1 Insulation	Description / Comment	-				Qty		Total	
# <i>Material / Labor</i> 1 Insulation	Description / Comment Attic Insulation - Blown Cellulose - R-30	SqFt	988			Qty		Total	
Comment Material / Labor Insulation Labor Other Detail	Description / Comment Attic Insulation - Blown Cellulose - R-30	SqFt	988			Qty		Total	
# Material / Labor 1 Insulation 2 Labor	Description / Comment Attic Insulation - Blown Cellulose - R-30	SqFt	988			Qty		Total	
# Material / Labor 1 Insulation 2 Labor	Description / Comment Attic Insulation - Blown Cellulose - R-30	SqFt SqFt	988					Total	

Measure 4 Stor Comment	m Windows			Componen Estimated			Actual	nspected
# Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1 Windows	Storm Window	SqFt	2					
2 Labor	Labor	Each						
Other Detail			Measur	e Sub Total:			Sub Total:	
Field Notes: Measure 5 CO	Monitor is Needed			Componen	ts			Inspected
Comment				Estimated			Actual	
# Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
Health and Safety Items	CO monitor	Each	1					
2 Labor	Labor	Hour	1					
Other Detail	[1	r			1		
			Measur	e Sub Total:		-	Sub Total:	
Field Notes:								

Measure 6 Fix A	Any Other Heating Syste	em Proble	em	Component	ts			Inspected
	non-vented heaters that w heater on North wall	do not ha	ave a c	oxygen deple	etion ser	isor.		
				Estimated			Actual	
# Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
Health and Safety Items	Direct Vent 20-25 KBTU Propane heater	Each	1					
2 Labor	Labor	Hour	1					
Other Detail								
]		

			Measur	e Sub Total:	***************************************		Sub Total:	
Field Notes:			•					
								1
Measure 7 Smo	ke Detector is Needed			Component	ts			Inspected
	ke Detector is Needed			Component	ts			Inspected
Measure 7 Smo Comment	ke Detector is Needed			Component Estimated	ts	***************************************	Actual	Inspected
	ke Detector is Needed Description / Comment	Units	Qty	ŕ	ts Total	Qty		Inspected Total
Comment		<i>Units</i> Each		Estimated		Qty	Actual	
Comment # Material / Labor 1 Health and Safety	Description / Comment		Qty	Estimated		Qty	Actual	
Comment # Material / Labor 1 Health and Safety Items	Description / Comment Smoke detector	Each	Q ty 1	Estimated		Qty	Actual	
Comment # Material / Labor 1 Health and Safety Items 2 Labor	Description / Comment Smoke detector	Each	Q ty 1	Estimated		Qty	Actual	
Comment # Material / Labor 1 Health and Safety Items 2 Labor	Description / Comment Smoke detector	Each	Q ty 1	Estimated		Qty	Actual	
Comment # Material / Labor 1 Health and Safety Items 2 Labor	Description / Comment Smoke detector	Each Hour	Qty 1 1	Estimated			Actual	
Comment # Material / Labor 1 Health and Safety Items 2 Labor	Description / Comment Smoke detector	Each Hour	Qty 1 1	Estimated Unit Cost			Actual Unit Cost	
# Material / Labor 1 Health and Safety Items 2 Labor Other Detail	Description / Comment Smoke detector	Each Hour	Qty 1 1	Estimated Unit Cost			Actual Unit Cost	
# Material / Labor 1 Health and Safety Items 2 Labor Other Detail	Description / Comment Smoke detector	Each Hour	Qty 1 1	Estimated Unit Cost			Actual Unit Cost	

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i	Measure 8	-	or Barrier Needed ement/Crawlspace)			Componen	ts			Inspected
C	Comment									
						Estimated		***************************************	Actual	
#	Material / Lak	or	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Health and S Items	afety	Basement / crawlspace vapor barrier	Each	1					
2	Labor		Labor	Hour	1					
(Other Detail									
ſ										
Γ										
L.	1				Measur	re Sub Total:			Sub Total:	
7	Field Notes:									
				Work Or	der Gra	and Total:	77	Gran	d Total:	

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